

# FEC FORM 2

## STATEMENT OF CANDIDACY

1. (a) Name of Candidate (in full)

Larry D Bucshon

(b) Address (number and street)

PO Box 250

(c) City, State and ZIP Code

Newburgh

IN

47629

☐ Check if address changed

2. Identification Number

H0IN08114

3. Is This Statement

☐ New (N)

OR

☒ Amended (A)

4. Party Affiliation

REPUBLICAN PARTY

5. Office Sought

House

6. State &amp; District of Candidate

IN 08

### DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2010 election(s).  
(year of election)

**NOTE:** This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full)

Bucshon for Congress

(b) Address (number and street)

PO Box 250

(c) City, State and ZIP Code

Newburgh

IN

47629

### DESIGNATION OF OTHER AUTHORIZED COMMITTEES

(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:** This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

IN-08 CONGRESSIONAL VICTORY COMMITTEE

(b) Address (number and street)

264 N. Lumpkin St #202

(c) City, State and ZIP Code

Athens

GA

30601

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct, and complete.

Signature of Candidate

Larry D Bucshon

Date

10/28/2010

**NOTE:** Submission of false, erroneous or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

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**DESIGNATION OF OTHER AUTHORIZED COMMITTEES****[ ADDITIONAL ]**

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:** This designation should be filed with the principal campaign committee.

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(a) Name of Committee (in full)

FOUNDERS JOINT CANDIDATE COMMITTEE

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(b) Address (number and street)

228 S WASHINGTON STREET SUITE 115

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(c) City, State and ZIP Code

ALEXANDRIA

22314

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**DESIGNATION OF OTHER AUTHORIZED COMMITTEES****[ ADDITIONAL ]**

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:** This designation should be filed with the principal campaign committee.

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(a) Name of Committee (in full)

SOUTHWEST INDIANA VICTORY FUND

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(b) Address (number and street)

228 S WASHINGTON ST STE 115

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(c) City, State and ZIP Code

ALEXANDRIA

22314

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**DESIGNATION OF OTHER AUTHORIZED COMMITTEES****[ ADDITIONAL ]**

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:** This designation should be filed with the principal campaign committee.

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(a) Name of Committee (in full)

HOOSIER YOUNG GUNS VICTORY COMMITTEE

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(b) Address (number and street)

913 PARK AVE

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(c) City, State and ZIP Code

NEWPORT

41071